

MULTIPLE DEPENDENT CLAIM

FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

101588627 9/3/08

CLAIMS

	AS FILED		AFTER		AFTER	
	1 ST AMENDMENT		2 ND AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5	1		1			
6		1		1		
7	1		1			
8	1		1	1		
9	1		1			
10	1	1	1	1		
11	1		1	1		
12	11		1			
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14	1					
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TOTAL IND.			7			
TOTAL DEP.			30			
TOTAL CLAIMS			37			

	AS FILED		AFTER		AFTER	
	1 ST AMENDMENT		2 ND AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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